ISSUE SLIP STAPLE AREA (for additional cross references)

HOITIZON	INITIALS	ID NO.	DATE
			10/
FEE DETERMINATION	ディ (三)		1. 6/50
O.I.P.E. CLASSIFIER	Min	50	6-9-64
FORMALITY REVIEW	27	60135	5/3/10
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

•	Rejected	N	Non-elected
=	Allowed	l	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim Date	Claim Date	Ctaim Date
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If more than 150 claims or 10 actions staple additional sheet here

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